


GILL TREMLETT

SUPERVISORY SKILLS

**MONITORING
AND
EVALUATING
USAGE**

AND COURSE SUMMARY



WORLD HEALTH ORGANIZATION
 **Programme for
Control of Diarrhoeal Diseases**

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MONITORING AND EVALUATING USAGE

AND COURSE SUMMARY

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MONITORING AND EVALUATING USAGE AND COURSE SUMMARY

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MONITORING AND EVALUATING USAGE AND COURSE SUMMARY

INTRODUCTION

Monitoring usage of a health service is one way that you can assess the effectiveness of the service. Monitoring usage of a service means regularly checking the extent to which the service is actually being used. The information obtained will make it possible to see how much services are used, determine whether problems are affecting usage, and find ways to increase use.

Evaluating usage of a health service means periodically (for example, once a year) comparing actual usage of the service to the usage targets to see if the usage targets were achieved. The information obtained will allow you to see if adequate progress was made in increasing usage and to increase the accuracy of your future usage targets; you will also be able to use the information when ordering supplies for the next year.

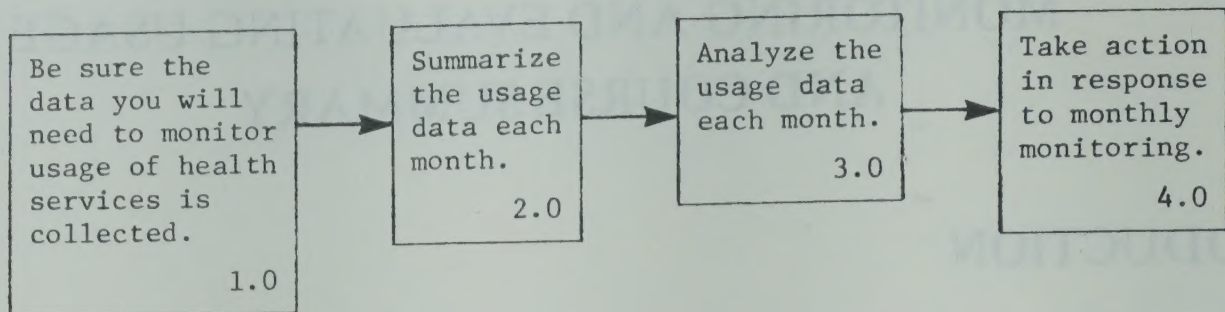
Both monitoring and evaluating usage should involve more than simply stating that use of a service is increasing or decreasing, or that a usage target was achieved. They should also involve finding out why usage is up or down or why usage targets were or were not met, and taking appropriate action.

Monitoring and evaluation should both be done at regular times. For example, at the end of each month, usage of services could be monitored for that month; at the end of each year, usage of health services could be evaluated for that year. The best time to evaluate usage of health services is just before setting usage targets for the coming year.

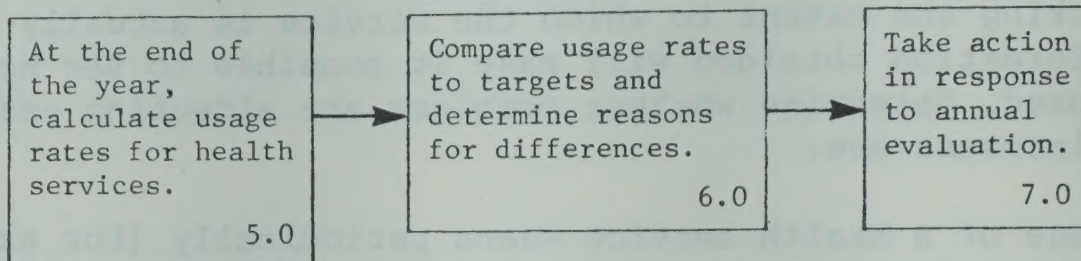
LEARNING OBJECTIVE

The tasks involved in monitoring and evaluating usage are shown on the following chart. The information, examples, and practice exercises in this module should prepare you to do these tasks in your own health area.

Monitoring Usage



Evaluating Usage



HOW THIS MODULE IS ORGANIZED

This module is presented in two parts:

- PART I: MONITORING USAGE OF HEALTH SERVICES (Steps 1.0 - 4.0)
describes how to monitor usage of services each month.
- PART II: EVALUATING USAGE OF HEALTH SERVICES (Steps 5.0 - 7.0)
describes how to do an annual usage evaluation.

There is also a COURSE SUMMARY at the back of the module which presents the main points of each module of this course.

PART I: MONITORING USAGE OF HEALTH SERVICES

1.0 BE SURE THE DATA YOU WILL NEED TO MONITOR USAGE OF HEALTH SERVICES IS COLLECTED.

1.1 DETERMINE WHAT DATA YOU WILL NEED.

To monitor usage of a health service, you will find out how many times the service is actually used each month. To be able to do this, you will need certain data on the patients seen at your health facility and seen by the community health workers in your health area. The data which should be collected on each patient include:

- the name of the patient,
- the date of visit (so you will know if usage was in the month you are monitoring),
- the age or birthdate of the patient (so you will know which patients are in the target population of the service), and
- the service provided to the patient (so you will know which service was used).

1.2 CHECK EXISTING FORMS (FOR EXAMPLE, PATIENT REGISTERS) TO DETERMINE IF THE DATA NEEDED IS ALREADY BEING COLLECTED. IF NECESSARY, MODIFY EXISTING FORMS TO OBTAIN THE NECESSARY DATA.

If you modify forms already used at the facility or used by a community health worker, be sure the health workers who will fill out the forms know how to obtain and record the additional information on each patient. To do this, provide each worker with examples of one or two completed forms as modified. Help them practice filling out one or two forms, and carefully observe them as they fill out another form to be sure they know how to do it. Observe the health workers closely the first few weeks they use the modified forms to be sure they are filling them out correctly.

Emphasize that, if possible, complete information for each visit should be recorded during the visit or immediately after a patient has been seen.

2.0 SUMMARIZE THE USAGE DATA EACH MONTH.

2.1 DEVELOP OR OBTAIN MONTHLY USAGE FORMS.

Monthly usage forms for preventive and treatment services will be your record of the actual usage of services offered by the health facility and community health workers in your health area.

(Examples of monthly usage forms are provided on the next 2 pages.) The forms should list the health services offered in your area, and the target populations for those services. There should be a place on the forms to record the number of uses of each health service during the month (total and by the target population), for the health facility and the community health workers and for the health area as a whole.

**MONTHLY USAGE FORM
PREVENTIVE SERVICES**

HEALTH AREA _____
MONTH _____ YEAR _____

		NUMBER OF USES OF PREVENTIVE SERVICES DURING THE MONTH									
		IMMUNIZATION				FAMILY PLANNING**		MALARIA PROPHYLAXIS		OTHER	
		Measles		DPT-3		Other					
		Total	By Target Population*	Total	By Target Population	Total	By Target Population	Total	By Target Population	Total	By Target Population
Health Facility											
Community Health Worker											
Community Health Worker											
TOTAL IN HEALTH AREA											

*Target population definitions may vary.
**You can include separate columns for each family planning service offered in your health area.

MONTHLY USAGE FORM
TREATMENT SERVICES

HEALTH AREA _____
MONTH _____ YEAR _____

DISEASES PREVENTABLE BY IMMUNIZATION		NUMBER OF USES OF TREATMENT SERVICES DURING THE MONTH																	
		DIARRHOEAL DISEASES										MALARIA TREATMENT		TRAUMA	RESPIRATORY ILLNESS		UNDER-NUTRITION	OTHER	
		Measles		Pertussis		Other		New Episodes Treated		OR Therapy									IV Therapy
		By Target Pop.*	Total	By Target Pop.	Total	By Target Pop.	Total	By Target Pop.	Total	By Target Pop.	Total	By Target Pop.	Total	By Target Pop.	Total	By Target Pop.	Total	By Target Pop.	Total
Health Facility																			
Community Health Worker in Sansul Village																			
Community Health Worker in Moulaba Village																			
TOTAL IN HEALTH AREA																			

*Target population definitions may vary.

2.2 COMPLETE THE MONTHLY USAGE FORMS.

To complete a monthly usage form for a month:

- A. Label the form with the name of the health area and the month and year you are monitoring.
- B. Review, for the month, the patient register kept in the health facility.
- C. Count in the patient register the total number of uses of each health service at the facility during the month. Then, in the row, "Health Facility", enter the total number of uses of each service at the facility.

(Note that a use may be defined differently for different services. For example, with diarrhoea treatment service you may wish to count each new episode of diarrhoea treated as one use. For other services you may wish to count one visit as one use. Be sure to define "use" here the same way you did when setting targets.)

- D. Count in the patient register the number of uses of each health service by the specified target populations during the month. Then, in the row, "Health Facility", enter the number of uses of each health service by the target population at the facility.
- E. Review, for the month, the patient register kept by each community health worker.
- F. Repeat steps C and D above for each community health worker in the health area. Enter the usage figures in the appropriate rows on the form.
- G. For each health service, add the total number of uses of the service in the health area. Enter the sum in the row, "TOTAL IN HEALTH AREA."
- H. For each health service, add the number of uses by the target population in the health area. Enter the sum in the row, "TOTAL IN HEALTH AREA."

EXAMPLE The supervisor of Bornu Health Area was completing his monthly usage form for preventive services for March 1984 for the measles immunization service. To do this, he did the following:

1. First, he reviewed the patient register kept at the health centre, and counted the number of measles immunizations given at the centre between March 1 and March 31. (Look at the entries in the patient register for March 1 and 2 on pages 12 and 13. Notice how the supervisor circled each use of the measles immunization service.)

2. He entered the total number of uses of the service at the centre for the whole month, that is, 35, on his monthly usage form in the row, "Health Centre." (See his monthly usage form on page 14.)
3. Next, he looked in the patient register at the age of each patient who was given a measles immunization, and identified all children who were in the target population for the service, that is, children 9 to 12 months of age.
4. He entered the number of uses of the measles immunization service by children 9 to 12 months of age for the month, that is, 30, in the row, "Health Centre." (See the monthly usage form.)
5. To determine the number of uses of each service for each community health worker, he reviewed the patient register kept by each health worker and repeated steps 1, 2, 3, and 4 above. He entered these usage figures in the appropriate rows on his form.
6. To determine the total number of uses of the measles immunization service in the entire health area in March, he added the number of uses in the health centre (35) to the numbers of uses for the community health worker in Sansui Village (9), and the community health worker in Moulaba Village (7). He entered this sum (51) in the row, "TOTAL IN HEALTH AREA."
7. To determine the total number of uses of the service by children 9 to 12 months of age in the entire health area, he added the number of uses by the target population in the health centre (30) to the number of uses for the community health worker in Sansui Village (7) and the community health worker in Moulaba Village (6). He entered this sum (43) in the row, "TOTAL IN HEALTH AREA."



EXERCISE A

In this exercise you will obtain usage data from a patient register and will complete a monthly usage form for the diarrhoea treatment service in Bornu Health Area.

Note: In Bornu Health Area, each new episode of diarrhoea treated is counted as one use of the diarrhoea treatment service. As you do Step 1 of this exercise, remember not to count repeat visits for the same episode of diarrhoea.

1. Refer to the patient register for March 1 and 2 for the health centre on pages 12 and 13, and answer the following questions:
 - a. How many new episodes of diarrhoea were treated at the health centre on March 1 and 2? _____ How many of these were in the target population for the diarrhoea treatment service (that is, in children less than 5 years)? _____
 - b. How many of the new episodes of diarrhoea were treated with OR therapy on March 1 and 2? _____ How many of these were in children less than 5 years? _____
 - c. How many of the new episodes of diarrhoea were treated with IV therapy on March 1 and 2? _____ How many of these were in children less than 5 years? _____
 - d. How many of the new episodes of diarrhoea were treated with antibiotics or other drugs on March 1 and 2? _____ How many of these were in children less than 5 years? _____
2. To determine actual usage of the diarrhoea treatment service in the centre for the entire month of March, the supervisor of Bornu Health Area reviewed all entries made in the register from March 1 to 31. He found that during March,
 - a total of 102 new episodes of diarrhoea were treated at the health centre, and 77 of these were in children less than 5 years.
 - 95 new episodes of diarrhoea were treated with OR therapy (either alone or with other treatment) at the centre, and 77 of these were in children less than 5 years of age,

- 10 new episodes of diarrhoea were treated with IV therapy (either alone or with other treatment), and 3 of these were in children less than 5 years, and
- 2 new episodes of diarrhoea were treated with antibiotics or other drugs (either alone or with other treatment), and both of these were in children less than 5 years.

Fold out the monthly usage form for treatment services on page 15. Enter the above usage figures in the appropriate row on the form.

Note: The number recorded in a column for a type of treatment would reflect the number of new episodes which received that specific treatment, with or without other treatment. For example, a new episode of diarrhoea treated with OR therapy alone would only be recorded in the column "OR Therapy." But a new episode of diarrhoea treated with both IV and OR therapy would be recorded in both of those columns. In either situation, each new episode of diarrhoea would be counted only once for the column "New Episodes Treated." As a result, when added together, the numbers recorded on the form in the columns "OR Therapy," "IV Therapy," and "Antibiotics or Other Drugs" might not total the number in the column "New Episodes Treated."

3. To determine actual usage of the diarrhoea treatment service for the community health workers in his area during March, the supervisor reviewed the patient register kept by each health worker. He found that from March 1 to 31,
 - 51 new episodes of diarrhoea were treated by the community health worker in Sansui Village, and 41 of these were in children less than 5 years. All were treated with OR therapy.
 - 47 new episodes of diarrhoea were treated by the community health worker in Moulaba Village, and 38 of these were in children less than 5 years. All were treated with OR therapy.

Enter the above usage figures for the diarrhoea treatment service for the community health workers in Bornu Health Area on the monthly usage form on page 15.

4. a. On the form, calculate and record the total number of new episodes of diarrhoea which were treated in Bornu Health Area between March 1 to 31. Calculate and record the number of new episodes of diarrhoea treated in children under 5 in the area in March.
- b. Calculate and record the total number of new episodes of diarrhoea which were treated with OR therapy in Bornu Health Area between March 1 to 31. Calculate and record the number of new episodes of diarrhoea in children under 5 treated with OR therapy in the area.

- c. Calculate and record the total number of new episodes of diarrhoea which were treated with IV therapy in Bornu Health Area between March 1 to 31. Calculate and record the number of new episodes in children under 5 treated with IV therapy in the area.
- d. Calculate and record the total number of new episodes of diarrhoea which were treated with antibiotics or other drugs in Bornu Health Area between March 1 to 31. Calculate and record the number of new episodes of diarrhoea in children under 5 treated with antibiotics in the area.

Be sure these sums are entered in the row "TOTAL IN HEALTH AREA" on the monthly usage form.

- 5. If you have brought a form which is used in your area to record the number of times a service is used each month, get it out now. Compare it to the Monthly Usage Forms in this module. Discuss it with the course facilitator when you discuss this exercise.

When you have finished this exercise, talk with the course facilitator.

Health Centre Patient Register

Bornu Health Area

Month March
Year 1984

Date of Visit	Name of Patient	Age of Patient	Reason for Visit	Repeat Visit?	Services Provided
1	Flory Andino	11 months	diarrhoea, measles		OR, aspirin, talcum powder
1	Miguel Tomás	3 years	malaria		chloroquin
1	Thyra Aye	4 months	immunization		DPT ₁
1	Catalina Abellar	4 years	respiratory illness		antibiotics
1	Elena Aral	2 months	diarrhoea	✓	OR
1	Pablo Cruz	28 years	broken leg		set leg, plaster
1	Alula Hadgu	18 months	diarrhoea		OR
1	Marina Martínez	19 years	prenatal		routine prenatal, including
1	Guillermo Montero	18 months	malaria		chloroquin, DPT ₂
1	Isabel Guerrero	10 months	respiratory		antibiotics
1	Arayura Kunasol	58 years	chronic arthritis	✓	aspirin
1	Roberto Moreno	15 months	diarrhoea		OR, DPT ₁ and BCG
1	Flavio Albuquerque	21 years	respiratory illness		antibiotics (plus family p
1	Dariga Chitprarop	9 months	immunization		DPT ₂ and <u>measles immun</u>
1	Sergi Aral	8 years	diarrhoea		OR
1	Rosalia Levy	24 years	prenatal		routine prenatal, including
1	Yongyout Rangaraj	7 months	diarrhoea and cough		OR and antibiotics
1	Jorge Ramirez	6 months	immunization		DPT ₂ and BCG
1	Utchen Charanasri	6 years	malaria		chloroquin, plus <u>measles i</u>
1	Ana Cárdenas	8 months	immunization		DPT ₂
1	Bencha Petchelai	10 months	diarrhoea		IV and OR
1	Biga Kone	3½ years	respiratory illness	✓	antibiotics

Patient Register

Month March
Year 1984

Date of Visit	Name of Patient	Age of Patient	Reason for Visit	Repeat Visit?	Services Provided
2	Ayo Mbaye	2 years	diarrhoea and undernutrition		OR plus nutritional advice to mother
2	Maria Teresa Falcon	16 years	prenatal		routine prenatal, plus TT ₁
2	Malikul Somthas	4 months	immunization		DPT ₁
2	Alaba Idris	10 months	measles		aspirin and talcum powder
2	Halida Akrong	2 years	diarrhoea		OR
2	Teresita Garcia	7 months	malaria		chloraquin, and DPT ₁
2	Juan Paz Moreno	17 years	gonorrhea	✓	antibiotics
2	Khin Lwin	10 months	immunization		DPT ₃ and <u>measles immunizations</u>
2	Annamma Eappen	21 years	prenatal		routine prenatal and TT ₂
2	Jai Narain	14 months	immunization		DPT ₃
2	Tomas Gonzalez	4 years	respiratory illness		antibiotics
2	Obanu Lasiso	27 years	diarrhoea		OR
2	Oneta Samai	18 years	prenatal		routine prenatal and TT ₁
2	Carlos Gomez	6 months	immunization		DPT ₂
2	Seyed Alam	18 months	malaria		chloraquin
2	Musa Teru	1 month	immunization		BCG
2	Jesus Mendez	11 months	diarrhoea		OR
2	Chusie Sujpluem	15 months	immunization		DPT ₁
2	Maria Sanchez	2 months	immunization		BCG
2	Alula Hadgu	18 months	diarrhoea	✓	OR
2	Dariga Dang	3 months	diarrhoea		not dehydrated; health education including instructions for home treatment vis. OR therapy
2	Salam Teru	4 years	chronic diarrhoea	✓	antibiotics

MONTHLY USAGE FORM
PREVENTIVE SERVICES

HEALTH AREA Bornu
MONTH March YEAR 1984

NUMBER OF USES OF PREVENTIVE SERVICES DURING THE MONTH																	
IMMUNIZATION SERVICES																	
	Measles		DPT-1		DPT-2		DPT-3		BCG		TT-1		TT-2		FAMILY PLANNING		MALARIA PROPHYLAXIS
	Total	9 to 12 months	Total	2 to 12 months	Total	2 to 12 months	Total	2 to 12 Months	Total	Less 1 Year	Total	Pregnant Women	Total	Pregnant Women	Total	Women 15 to 44 years	
Bornu Health Centre	35	30	59	44	49	44	39	36	38	33	35	35	23	23	10	10	5
Community Health Worker in Sansul Village	9	7	14	12	10	9	6	6	11	9	5	5	2	2	1	1	0
Community Health Worker in Moulaba Village	7	6	9	8	8	6	5	5	9	8	2	2	1	1	1	1	0
TOTAL IN HEALTH AREA	51	43	82	67	67	59	50	47	58	50	42	42	26	26	12	12	5

*Target Population = All Ages

MONTHLY USAGE FORM

TREATMENT SERVICES

NUMBER OF USES OF TREATMENT SERVICES DURING THE MONTH																
BY IMMUNIZATION			DIARRHOEAL DISEASES								MALARIA TREATMENT		TRAUMA	RESPIRATORY ILLNESS	UNDER- NUTRITION	
ssis Less Than 1 Year	Neonatal Tetanus		New Episodes Treated		OR Therapy		IV Therapy		Antibiotics or Other Drugs							
	Total	Less Than 1 Year	Total	Less Than 5 Years	Total	Less Than 5 Years	Total	Less Than 5 Years	Total	Less Than 5 Years	Total	Less Than 5 Years	Total*	Total*	Total*	
10	2	2									50	30	10	50	10	
1	0	0									16	10	2	7	1	
0	1	1									14	8	2	6	2	
11	3	3									80	48	14	63	13	

HEALTH AREA Bornu
MONTH March YEAR 1984

	DISEASES PREVENTABLE			
	Measles		Pertu	
	Total	Less Than 1 Year	Total	
Bornu Health Centre	15	10	14	
Community Health Worker in Sansui Village	2	1	1	
Community Health Worker in Moulaba Village	2	2	0	
TOTAL IN HEALTH AREA	19	13	15	

*Target Population = All Ages

2.3 KEEP GRAPHS ON USAGE OF EACH SERVICE.

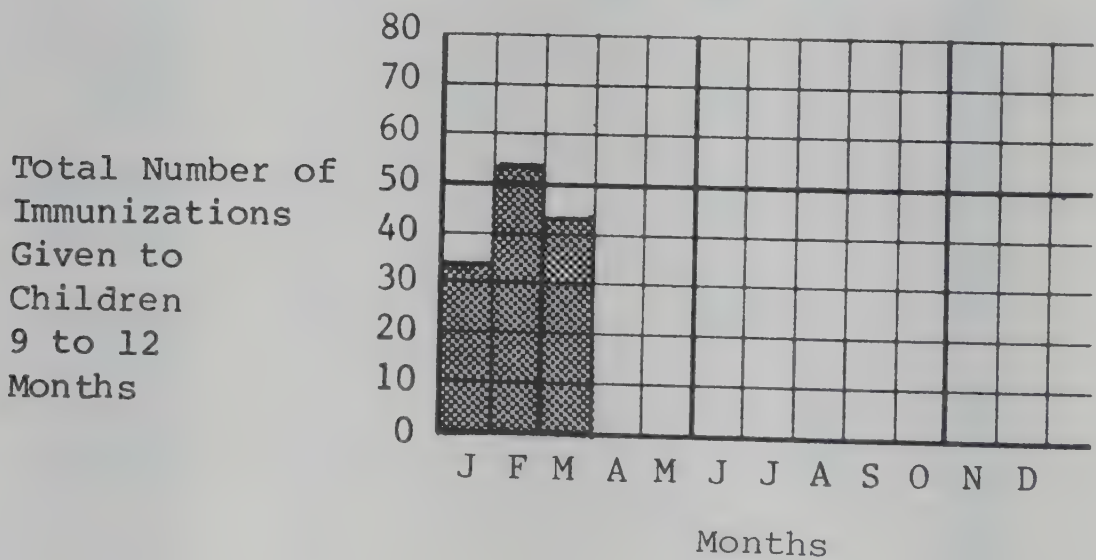
There are two types of graphs which you can keep to monitor usage of a health service: a monthly usage graph and a cumulative usage graph. These graphs should be made at the beginning of each year and filled in each month.

- Keep a monthly usage graph for health services.

A monthly usage graph for a service will show the total number of uses of that service by the target population by month. This type of graph will allow you to see differences in usage of the service from month to month. It will be important to find out the reason for these differences. After keeping a monthly usage graph on a service for a few years, you will be able to observe seasonal patterns in usage of the service in your area. Knowledge of seasonal patterns in usage will be helpful in setting targets and ordering supplies.

EXAMPLE

Monthly Usage Graph for
Measles Immunization Service in Bornu Health Area, 1984



The letters on the bottom line of the graph represent the months of the year. The numbers on the vertical line at the left (that is, the numbers 0, 10, 20 . . . 80) represent total number of uses of the health service by the target population. These numbers may be different for each health service you monitor. It is important to remember that the number at the very top of this line should always be greater than the number of expected uses of the service for any month.

Notice that the graph in this example has been filled in for three months. The graph shows that 34 measles immunizations were given to children 9 to 12 months of age in Bornu Health Area in January, 52 in February, and 43 in March.

To fill in a monthly usage graph for a month,

- (1) obtain from the monthly usage form the total number of uses of the service by the target population during the month ("TOTAL IN HEALTH AREA").
 - (2) locate the number of uses on the vertical axis, and
 - (3) above the letter for the month, draw a bar to that number.
- Keep a cumulative usage graph for health services.

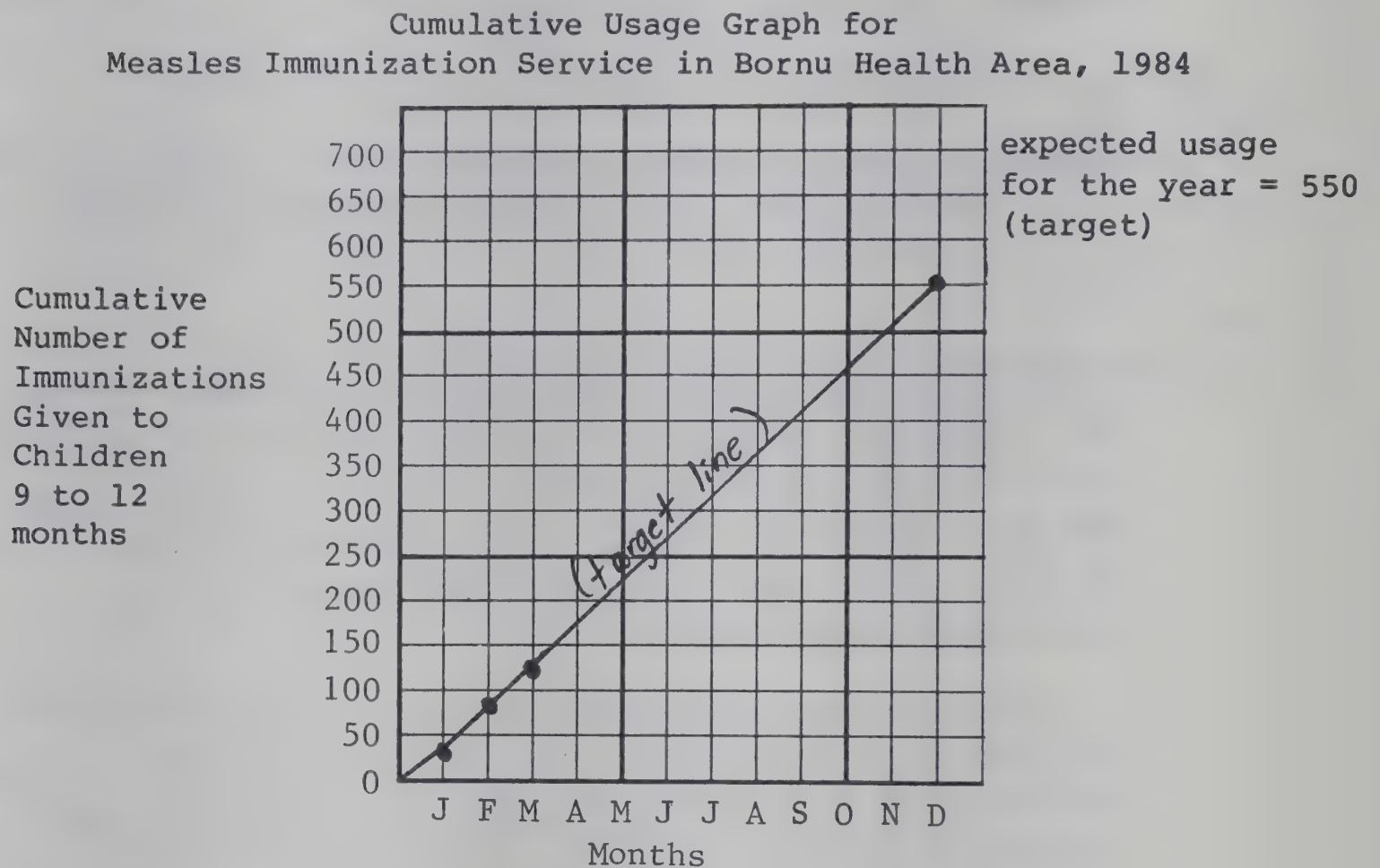
It may be helpful to keep a cumulative usage graph for those health services where there is not a seasonal variation in need or demand for the service (for example, immunization services).

A cumulative usage graph for a service will show the cumulative number of uses of the service through the year. This means that the point for a month on a cumulative graph represents the sum of the number of uses of the service for that month plus the number of uses for all previous months of the year. With this type of graph, you will be able to check progress through the year toward achievement of your end-of-year usage target.

A cumulative usage graph may not be helpful for monitoring services where there is a known seasonal variation in occurrence of the disease and thus in need or demand for the service, such as diarrhoea treatment. It will be difficult to see if you are making adequate progress toward achieving a target for the service because progress toward the target may not occur at a regular rate. With experience, however, you will be able to estimate the seasonal variations and consider them in determining whether cumulative usage is "on target."

EXAMPLE On the following page is an example of a cumulative usage graph for the measles immunization service in Bornu Health Area.

Notice that a major difference in the appearance of this graph and the monthly usage graph on page 16 is that this graph has a line drawn across it. When you first make a cumulative usage graph, you should plot a point on the graph on the vertical line above "D" for December, directly across from the expected usage for the service for the year (in this example, that number is 550). Then draw a straight line from the zero (0) to the point. This line could be called the "target line."



Notice also that this cumulative usage graph has been filled in for 3 months. According to the graph, cumulative use of the measles immunization service in Bornu Health Area was as follows:

Month	Monthly Usage	Cumulative Usage
January	34	34
February	52	86 (that is, 34 + 52)
March	43	129 (that is, 34 + 52 + 43)

To fill in a cumulative usage graph for a month,

- (1) Add the total number of uses of the service by the target population during the current month to the total number of uses of the service by the target population during all previous months of the year.
- (2) Locate the number of uses on the vertical axis, and plot a point across from that number on the vertical line above the month.

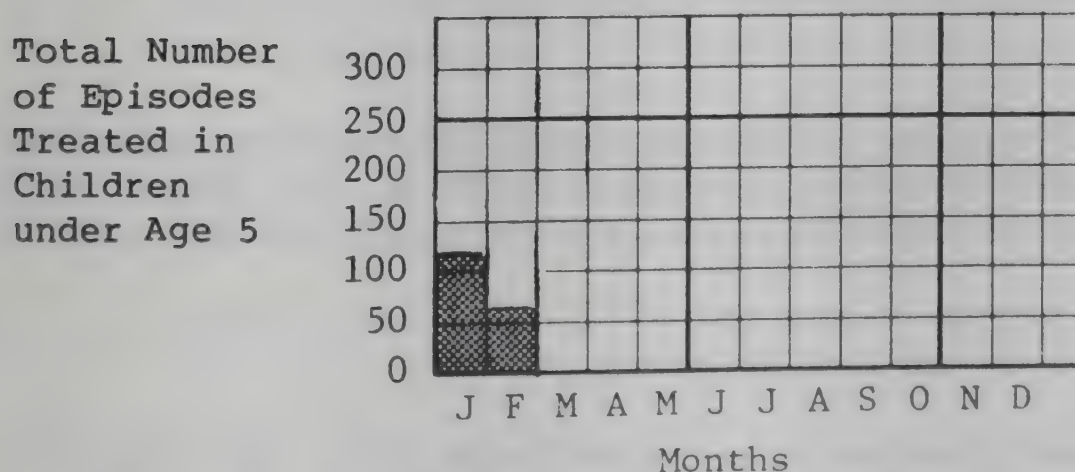


EXERCISE B

In this exercise you will complete a monthly usage graph for one month for the diarrhoea treatment service in Bornu Health Area.

1. Look at the monthly usage form for treatment services on page 15. What was the total number of uses of the diarrhoea treatment service by children less than 5 years of age in Bornu Health Area in March? (Remember: In Bornu Health Area, this figure will be the total number of new episodes of diarrhoea treated in children less than 5 years.) Write your answers in the space below.
2. Below is a monthly usage graph for the diarrhoea treatment service for Bornu Health Area. Bars showing usage of the service for January and February have already been drawn. Draw a bar on the graph to show usage for March.

Monthly Usage Graph for
Diarrhoea Treatment Service in Bornu Health Area, 1984



When you have finished this exercise, talk with the course facilitator.

3.0 ANALYZE THE USAGE DATA EACH MONTH.

You will plot usage on your usage graphs each month. After you have been keeping the graphs for 3 or 4 months, you should start looking for monthly differences in usage and start assessing progress toward achievement of your targets.

3.1 DETERMINE IF THERE HAS BEEN A BIG INCREASE OR DECREASE IN USAGE OF A SERVICE FROM ONE MONTH TO THE NEXT.

Look at your monthly usage graph. Compare usage during the current month to usage for previous months of the same year. After you have kept graphs for a year or more, you can also compare actual usage for the current month to usage for the same month in previous years.

If you notice that there has been a big change in usage of a service for a month and you know it is due to a seasonal pattern, then you will not need to investigate to find the reason for the change.

3.2 DETERMINE IF SATISFACTORY PROGRESS IS BEING MADE TOWARD ACHIEVEMENT OF THE USAGE TARGET FOR THE SERVICE.

If you are keeping a cumulative usage graph for the service, notice where the points are that you plotted for each month. Are they all close to the target line? This would indicate that satisfactory progress is being made. Is the point for the current month much lower than the target line? This would indicate that satisfactory progress is not being made.

3.3 IF THERE HAS BEEN A BIG INCREASE OR DECREASE IN USAGE FOR THE MONTH IF IT APPEARS THAT SATISFACTORY PROGRESS IS NOT BEING MADE TOWARD ACHIEVEMENT OF YOUR USAGE TARGET, INVESTIGATE TO FIND OUT WHY.

You can investigate in the following ways:

- talking with health workers, with your supervisor, or with supervisors of other health areas, and looking at usage data from previous years to see if there is some good explanation (for example, a known epidemic or seasonal trend),
- checking for counting errors that might have been made when determining number of uses of the service for the month (step 2.2),

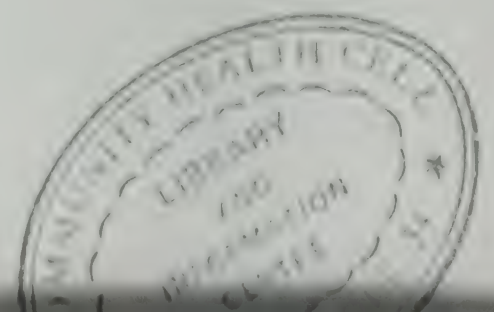
- reviewing records of monthly monitoring of performance of health workers (see Monitoring Performance) to see if any problems or achievements you identified might be affecting usage of the service (for example, you may have found that a new health worker was diagnosing patients' illnesses incorrectly or was incorrectly recording service provided),
- discussing clinic practices related to the service with health workers,
- asking health workers about who has been coming for the service and who has not,
- talking with mothers and community decision makers to see how the community is reacting to the service.

REASONS USAGE MIGHT BE LOW:

- there may be a seasonal low in need for service (episodes of diarrhoea) or in use of service (transportation is difficult during rainy season);
- overall demand for service may have decreased (for example, the number of episodes decreased so there were not as many episodes to be treated),
- clinic practices may be discouraging or limiting use,
- adequate supplies may not have been available,
- people may not be using services for social or economic reasons,
- records may not be correct,
- diagnoses may have been wrong (for example, patients who actually had the disease may have been diagnosed as having another disease),
- plans for increasing access or usage may not have been carried out (for example, a community health worker may not have been assigned to a village as expected),
- promotional activities may not be appropriate or may not be reaching the right group of people.

REASONS USAGE MIGHT BE HIGH:

- there may be a seasonal high in disease occurrence or in use of service (for example, if there has been an epidemic),
- overall demand for service may have increased (for example, if a private physician has left the area),



- clinic practices may be encouraging use (for example, convenient clinic hours),
- target population of service may have increased,
- records may not be correct,
- diagnoses may have been wrong (for example, patients who did not have the disease may have been diagnosed as having it),
- promotional activities may be starting to reach the right group of people.

EXAMPLE When the supervisor of the Bornu Health Area compared usage of the DPT immunization service for March 1984 to usage of the service for January and February, he noted that there was a very big increase in usage in March. To find out what caused this big increase, he spoke with health workers in his area involved in immunization activities and reviewed the vaccine stock cards.

The supervisor found that the supply of DPT vaccine which was ordered in June 1983 and should have arrived in January 1984 did not arrive until early March. Children brought for immunizations to the health facility and to the outreach workers in the villages of Sansui and Moulaba in January and February were given measles and BCG immunizations as needed. Mothers were told to bring their children back for DPT immunizations in March.



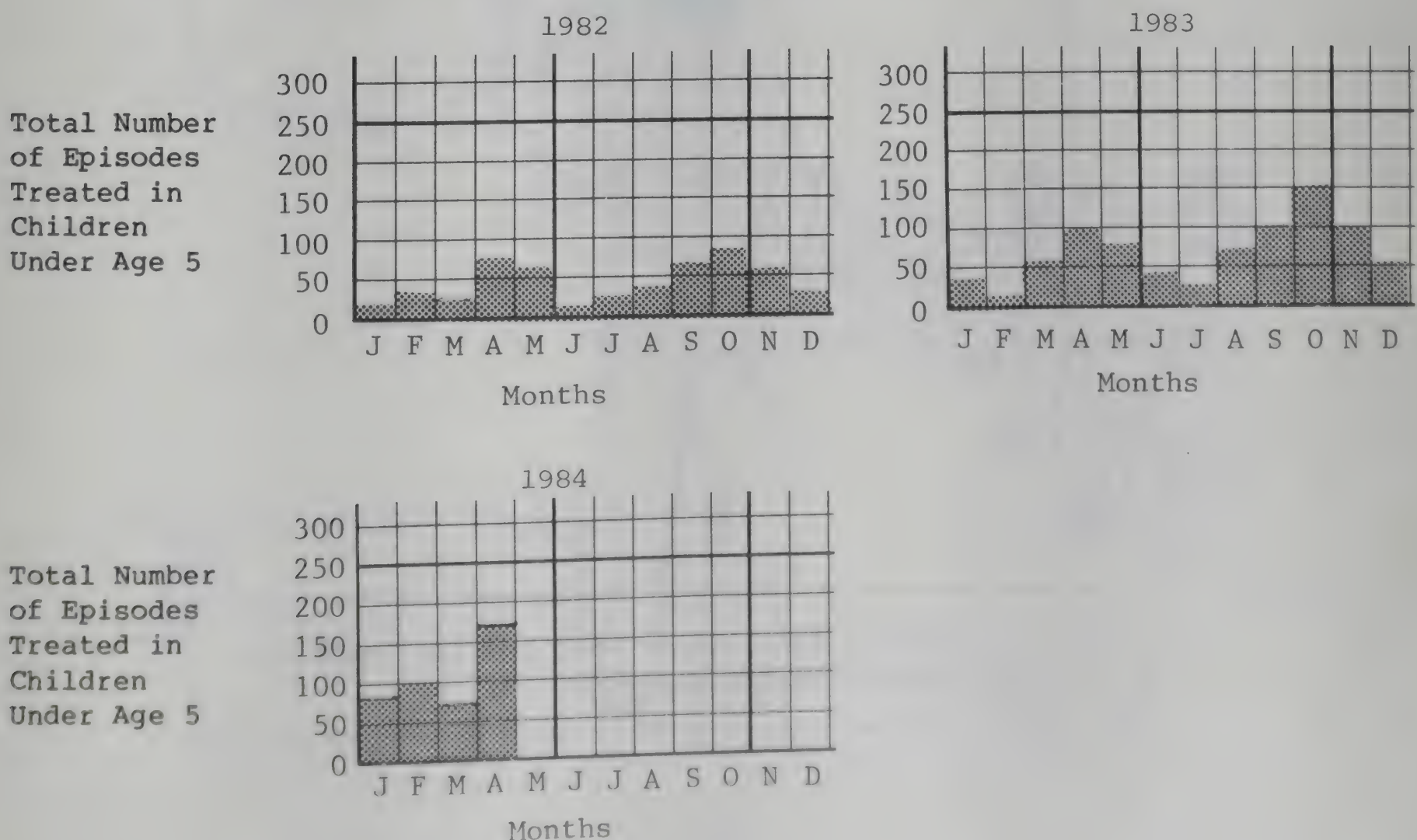
EXERCISE C

In this exercise you will compare monthly usage of the diarrhoea treatment service in another health area, the Mamba Health Area, for April 1984 to usage of the service in April 1982 and 1983. If you think there is a big difference, you will suggest likely reasons for the difference. You will then meet as a group to discuss your answers.

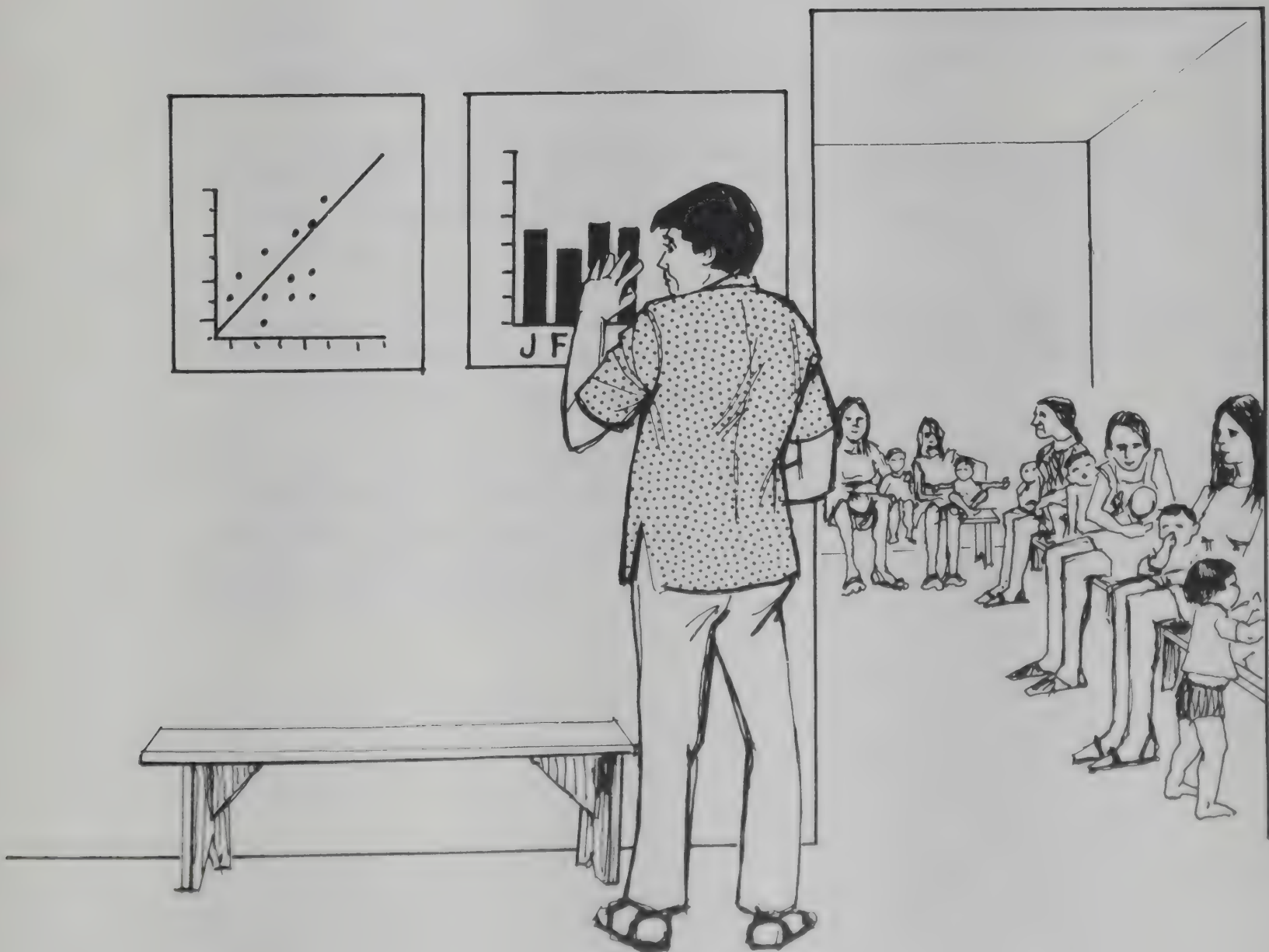
This is the first year (1984) that OR therapy is being offered in the Mamba Health Area. The supervisor of the area has been keeping a monthly usage graph for the diarrhoea treatment service for 4 months. He wanted to know how usage for April 1984 compared to usage for April of previous years, so he took the 1982 and 1983 usage data that he had used to write his 1984 usage targets and made graphs showing monthly usage of the service during those years.

The usage graphs for the diarrhoea treatment service in the Mamba Health Area for 1982, 1983, and January - April 1984 are shown below. Look at these graphs, and compare actual usage of the service for April 1984 to usage in April 1982 and 1983. Then answer the questions on the next page.

Monthly Usage Graphs for
Diarrhoea Treatment Service in Mamba Health Area



MONITORING AND EVALUATING USAGE
AND COURSE SUMMARY



4.0 TAKE ACTION IN RESPONSE TO MONTHLY MONITORING.

4.1 USE INFORMATION FROM YOUR MONTHLY ANALYSIS TO RESOLVE ANY PROBLEMS AFFECTING USAGE OF SERVICE.

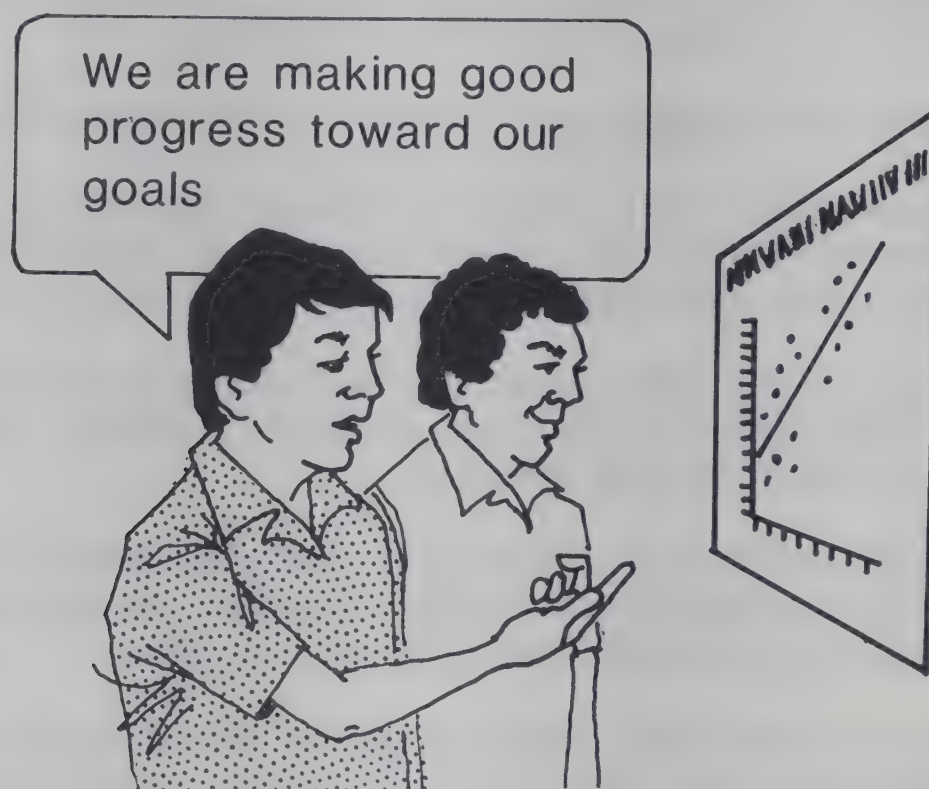
If there has been a big increase or decrease in usage of a service, appropriate action should be taken (unless the only reason for a difference is a known seasonal high or low in need for the service). Action should also be taken if it appears that you are not making satisfactory progress toward achievement of your year-end usage target for a service.

Here are some examples of actions which might be necessary.

- If you found that people can only come to the health facility at certain times or on specific days, you might adapt the hours that the clinic is open to suit the community.
- If you found that women are not using a service because there are only male workers and in their culture there are taboos, hire female health workers.
- If you found that the health facility cannot be reached by public transport, you might consider asking the local bus to include the health facility on its route.
- If you found that certain health workers are not liked by the community, you might need to remove the workers from their jobs. Consider district and tribal conflicts before replacing the workers.
- If you found that overall demand for the service is much more than expected, you might need to order more supplies so you can serve the increased number of people.
- If you found that health workers have been diagnosing patients incorrectly (resulting in records that show increased usage of one service and decreased usage of another), then you will need to take action as described in Monitoring Performance to solve the problem.

4.2 PROVIDE FEEDBACK TO HEALTH WORKERS.

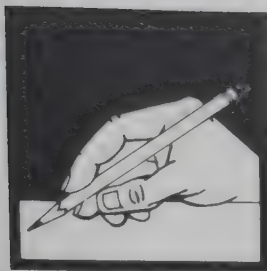
In addition to resolving any problems you might have found which affected usage, you should provide feedback to health workers. Feedback can include informing health workers about the effectiveness of a health service, providing them with information that might be helpful in solving problems, and congratulating them on doing a good job or encouraging them to do a better job.



4.3 IF REQUESTED, REPORT RESULTS OF MONTHLY MONITORING OF USAGE TO YOUR DISTRICT SUPERVISOR.

You may be asked to report results of monthly monitoring of usage to your district supervisor. If so, you might include the following information in your report:

- monthly usage totals for each service,
- reasons identified for significant increases or decreases in use, if any,
- corrective action to be taken or currently being taken to resolve any problems identified,
- action required at a higher level, and
- successful practices or procedures that you would recommend for facilities or other community health workers in the district.



EXERCISE D

In this exercise you will identify possible actions to take in response to monthly monitoring of the diarrhoea treatment service in Bornu Health Area.

In monitoring usage of the diarrhoea treatment service for April 1984, the supervisor of Bornu Health Area determined that there was a big increase from previous months usage. The possible reasons for the increase that he identified are listed below. Write at least 1 action the supervisor might take in response to each situation.

Possible Reasons for Increase	Possible Actions
1. OR therapy is being offered for the first time in 1984 in the area. It has proven to be very popular, and more mothers are bringing in their children for treatment than expected.	
2. Health workers who have just been trained to provide OR therapy are very enthusiastic about it.	
3. The promotional campaign for OR therapy has been effective.	

When you have finished this exercise, talk with the course facilitator.

PART II: EVALUATING USAGE OF HEALTH SERVICES



NOTE: Steps 5.0 - 7.0 would be done at the end of the year only.

5.0 AT THE END OF EACH YEAR, CALCULATE USAGE RATES FOR HEALTH SERVICES.

The following data are needed to calculate usage rates for a service:

- total number of times the service was used during the year being evaluated,
- desired usage of the service by the target population with access (calculated in Targets), and
- desired usage of the service by the target population in the entire health area (calculated in Targets).

5.1 CALCULATE THE USAGE RATE FOR THE TARGET POPULATION WITH ACCESS TO THE SERVICE.

Divide the actual usage of a service (that is, the total number of times the service was used) by the desired usage of that service by the target population with access. Express the result as a percentage. (Desired usage of a service by the target

population with access was determined at the beginning of the year, and should be recorded on your "Targets and Achievements" form.)

$$\frac{\text{actual usage}}{\text{desired usage by target population with access}} = \text{usage rate for the target population with access}$$

EXAMPLE The supervisor of Bornu Health Area needed to calculate the usage rate for children under age 1 with access to the measles immunization service in 1984. He knew that 506 measles immunizations were given to the target population from January through December 1984. He obtained his earlier estimate of desired usage by the target population with access, which was 920, from his "Targets and Achievements" form for the year January 1984 through December 1984. (Fold out page 37. Notice that this number has been circled on the form.) Using this information, the supervisor calculated the usage rate as follows:

$$\begin{array}{ccccccc} 506 & \div & 920 & = & 0.55 & = & 55\% \\ \text{(actual usage)} & & \text{(desired usage by target population with access)} & & \text{(usage rate for children under age 1 with access)} & & \end{array}$$

After calculating this actual usage rate, he recorded it on the section of the form "Complete at End of Year" in the column titled "Usage Rate for Those With Access."

5.2 CALCULATE THE USAGE RATE FOR THE TARGET POPULATION IN THE ENTIRE HEALTH AREA.

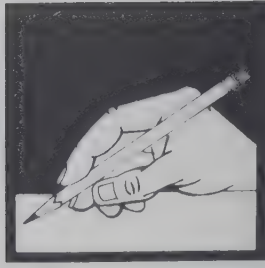
Divide actual usage of the service by desired usage for the entire health area.

$$\frac{\text{actual usage}}{\text{desired usage for entire health area}} = \text{usage rate for the health area}$$

EXAMPLE The supervisor of Bornu Health Area knew that 506 measles immunizations were given to the target population in his area in 1984. Earlier in the year he had estimated that desired usage of the service for the entire health area was 1,000. (Notice that this number has also been circled on the "Targets and Achievements" form on page 37.) Using this information, he calculated the usage rate as follows:

$$\begin{array}{ccccccc} 506 & \div & 1,000 & = & 0.51 & = & 51\% \\ \text{(actual usage)} & & \text{(desired usage for health area)} & & \text{(usage rate for health area)} & & \end{array}$$

After calculating this usage rate for his entire health area for 1984, he recorded it on the form in the column titled "Usage Rate for Health Area."



EXERCISE E

In this exercise you will calculate the actual usage rates for the diarrhoea treatment service in Bornu Health Area in 1984.

1. Read the following information about Bornu Health Area:
 - 2,699 episodes of diarrhoea in children under age 5 were treated in the Bornu Health Area in 1984.
2. Complete the following worksheet. When you need data, refer to the information above and to the "Targets and Achievements" form on page 37.

NOTE: Express your answers on the worksheet as whole numbers or decimal fractions, as you did in Targets. Express the decimal fractions so they have 2 digits to the right of the decimal point (for example, 0.18 instead of 0.184).

As you complete this exercise, remember that you **SET** targets for the diarrhoea treatment service at the **BEGINNING** of 1984, and are **EVALUATING** these targets at the **END** of 1984.

EVALUATION WORKSHEET

A. CALCULATE USAGE RATE FOR THE TARGET POPULATION WITH ACCESS TO THE SERVICE (in this case, diarrhoea treatment).

A-1 How many times was the service actually used in the past 12 months?

actual usage

A-2 Record actual usage of the service on the "Targets and Achievements" form on page 37 in the column titled "Actual Usage."

A-2 At the beginning of the year, what was estimated to be desired usage for the target population with access?

desired usage for
target population
with access

A-4 Calculate the usage rate for those with access by dividing as follows:

----- ÷ ----- = -----
actual usage desired usage for
 target population
 with access usage rate for
 target population
 with access

A-5 Express this usage rate as a percentage and enter it on the "Targets and Achievements" form in the column titled "Usage Rate for Those with Access."

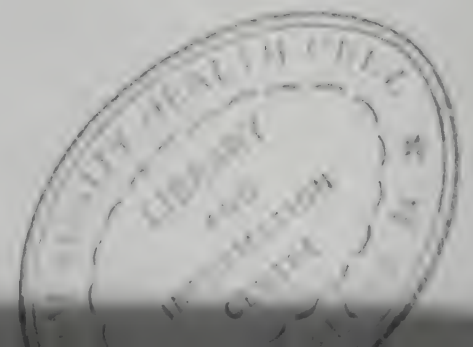
B. CALCULATE USAGE RATE FOR THE ENTIRE HEALTH AREA.

B-1 At the beginning of the year, what was estimated to be desired usage of the service by the target population in the entire health area?

desired usage for
health area

B-2 Calculate the usage rate for the entire health area by dividing as follows:

----- ÷ ----- = -----
actual usage desired usage for
 entire health area usage rate for
 the health area



B-3 Express the usage rate for the entire health area as a percentage, and record it on the "Targets and Achievements" form in the column titled "Usage Rate for Health Area."

Remember that the usage rates that you calculate at the end of a year will be used in setting targets for the coming year. For example, the supervisor of Bornu Health Area will consider these usage rates for the diarrhoea treatment service for 1984 in setting usage targets for the service for 1985.

Notice that a copy of the Evaluation Worksheet is included in the Annex at the back of this module. This is for you to use when calculating actual usage rates for your health area.

When you have finished this exercise, talk with the course facilitator.

6.0 COMPARE USAGE RATES TO TARGETS AND DETERMINE REASONS FOR DIFFERENCES.

6.1 COMPARE ACTUAL USAGE OF A SERVICE TO USAGE TARGETS FOR THAT SERVICE.

For each health service being evaluated, compare the usage rates calculated in steps 5.1 and 5.2 to the targets for that service.

Determine if there is a major difference between the usage rates and targets.

6.2 IF THERE IS A MAJOR DIFFERENCE BETWEEN ACTUAL USAGE RATES AND TARGETS, IDENTIFY PROBABLE REASONS FOR DIFFERENCES.

In many cases you will find that by monitoring usage of the service during the year, you have already identified the circumstances which led to the differences between actual usage rates and targets for a service. If this occurs, you will not need to investigate further.

A major reason for differences in rates at the end of a year may be that data used in setting the targets were not accurate. The usage data that were available when you first set the targets may have been incomplete or of questionable accuracy, or there may have been no helpful data. As a result, the first few times a comparison is made between targets and usage rates, differences may be very large.

Therefore, if the usage was much less than the target, this will not necessarily mean that something is wrong or that your efforts have not been successful. Or, if the usage was much more than the target, this will not necessarily mean that everything is fine and that your efforts have been a total success. It is important to remember that it may take a few years for targets to be more accurate. Knowing the reasons for a difference will help you to write a more accurate target next time.

If usage for the year was much more than expected, consider the following:

- Has the need for the service increased, for example, has there been an epidemic which might have increased the number of cases of a disease?
- Have many people moved into the health area?
- Was community concern about the problem previously underestimated?

If usage for the year was much less than expected,

- Has the need for the service decreased, for example, has the number of cases decreased so that perhaps there were not as many cases to be treated?
- Are people treating diarrhoea at home (for example, with sugar and salt solution, commercial products) so that perhaps fewer cases are coming to the health centre?
- Was your definition of your access area too broad?
- Were people in the access area receiving services from a private provider?
- Was community concern about the problem previously overestimated?



EXERCISE F

In this exercise you will compare actual usage of the diarrhoea treatment service in Bornu Health Area for 1984 to the usage targets for that service to determine if there are major differences. If you think there are major differences, you will suggest likely reasons for the differences. When everyone is ready, there will be a group discussion.

1. Look at the "Targets and Achievements" form on page 37, and fill in the blanks in the statement below.
 - The usage target for those with access to the diarrhoea treatment service was ____%.
 - The usage rate for those with access was ____%.
 - The usage target for the health area was ____%.
 - The usage rate for the health area was ____%
2. Do there appear to be major differences between the usage rates and targets? Explain.
3. If you think there are major differences, think of at least 1 possible reason for the differences. Write your answer below.

Tell the course facilitator when you are ready for a group discussion of this exercise.

7.0 TAKE ACTION IN RESPONSE TO ANNUAL EVALUATION.

7.1 USE INFORMATION FROM YOUR EVALUATION TO CORRECT ANY PROBLEMS AFFECTING USAGE OF THE SERVICE THAT WERE NOT CORRECTED EARLIER IN THE YEAR (SEE STEP 4.0).

After you have identified the most likely reason for differences in usage rates and targets, you will need to identify ways to correct that difference--unless the problem affecting usage was identified earlier in the year through monitoring and has already been corrected.

7.2 USE INFORMATION FROM YOUR EVALUATION TO INCREASE THE ACCURACY NEXT YEAR'S USAGE TARGETS AND TO ESTIMATE HOW MANY SUPPLIES ORDER. (THE PROCEDURES FOR SETTING TARGETS AND ORDERING SUPPLIES ARE DESCRIBED IN *TARGETS*.)

7.3 IF REQUESTED, REPORT RESULTS OF YOUR EVALUATION TO DISTRICT SUPERVISOR.

If you will report results of monthly monitoring of usage to your supervisor, you might include the following additional information in the report that you submit the last month of the year:

- usage rates calculated for each service for the year,
- probable reasons for differences in usage rates and targets, if any, and
- action to be taken or currently being taken to correct any problems identified (for example, revision of next year's usage targets).

Evaluation results from supervisors of all health areas in the district can be used by your supervisor to evaluate usage of services in the entire district. The results will also be valuable for setting targets for usage of services in the district for the next year. In addition, this information will be a good way to show your district supervisor what has been accomplished in your health area.

After evaluation, provide FEEDBACK to health workers and the community.

TARGETS AND ACHIEVEMENTS

Year of Report: From January 1984 Through December 1984
(month) (year) (month) (year)

ities and Health Workers in Health Area (Indicate Number of Each):

3 Community Health Workers _____ Dispensary _____ Hospital _____ Other

COMPLETE AT BEGINNING OF YEAR:							COMPLETE AT END OF YEAR:		
Expected Target Population With Access	Desired Usage by Target Population With Access	Expected Usage	Usage Target for Those With Access	Total Target Population in Health Area	Desired Usage for Health Area	Usage Target for Health Area	Actual Usage	Usage Rate for Those With Access	Usage Rate for Health Area
4,600	9,200	1,840	20%	5,000	10,000	18%			
920	920	550	60%	1,000	1,000	55%	506	55%	51%
920	920	600	65%	1,000	1,000	60%	552	60%	55%
4,600	6,900	1,750	25%	5,000	7,500	23%	719	10%	10%

e, assumptions made in setting targets, reasons why targets were or were not achieved):
a) a bridge will be provided between Bornu and Prambas, b) a community health worker, c) resources for promotional material will be available, and d) outreach immunization led to all villages with community health workers.

Name _____ Position: Supervisor Date Targets Set: January 1984
Date Evaluated: January 1985

Health Area: Bornu

Types of Health Facility

1 Health Centre

Service	Target Population Definition
Treatment of Diarrhoea	Children Under Age 5
Measles Immunization	Children Under Age 1
DPT-3	Children Under Age 1
Treatment of Malaria	Children Under Age 5

Comments (for example:
Assumptions are that:
will be assigned to m.
services will be provide

Signature: Your'

REMEMBER THIS

ABOUT MONITORING AND EVALUATING USAGE

- Monitoring usage of health services each month should help you find and correct problems affecting usage of the services at an early stage.
- Evaluating whether usage targets for the year were achieved should tell you how much progress has actually been made in increasing usage of health services, and should help you to increase the accuracy of future usage targets.
- Monitoring and evaluating usage should also include trying to find out why usage is up or down or why usage targets were or were not met, and taking appropriate action.
- It is important to investigate reasons for both problems and successes.
- After monitoring and evaluating usage, you should always provide prompt feedback to health workers and the community.

ANNEX

Blank Copy of Evaluation Worksheet
for Use in Your Own Health Area

EVALUATION WORKSHEET

A. CALCULATE USAGE RATE FOR THE TARGET POPULATION WITH ACCESS TO THE SERVICE.

A-1 How many times was the service actually used in the past 12 months?

actual usage

A-2 Record actual usage of the service on the "Targets and Achievements" form in the column titled "Actual Usage."

A-2 At the beginning of the year, what was estimated to be desired usage for the target population with access?

desired usage for
target population
with access

A-4 Calculate the usage rate for those with access by dividing as follows:

$$\frac{\text{----- actual usage}}{\text{----- desired usage for target population with access}} = \text{----- usage rate for target population with access}$$

A-5 Express this usage rate as a percentage and enter it on the "Targets and Achievements" form in the column titled "Usage Rate for Those with Access."

B. CALCULATE USAGE RATE FOR THE ENTIRE HEALTH AREA.

B-1 At the beginning of the year, what was estimated to be desired usage of the service by the target population in the entire health area?

desired usage for
health area

B-2 Calculate the usage rate for the entire health area by dividing as follows:

$$\frac{\text{----- actual usage}}{\text{----- desired usage for entire health area}} = \text{----- usage rate for the health area}$$

B-3 Express the usage rate for the entire health area as a percentage, and record it on the "Targets and Achievements" form in the column titled "Usage Rate for Health Area."

Remember that the usage rates that you calculate at the end of a year will be used in setting targets for the coming year.

DEFINITIONS OF TERMS

- Access -** the opportunity to obtain or use a service. People who have access to a health service are those who live near enough to use it.
- Cumulative -** increasing in size by repeated addition. For example, at the end of February, cumulative use of a service thus far for a year would equal January use + February use. At the end of March, cumulative use thus far for a year would equal January use + February use + March use.
- Data -** information organized for analysis or used as a basis for a decision. To determine how many times a service is actually used, certain data must be collected on patients who visit each health facility and community health worker in a health area.
- Epidemic -** occurrence of cases of a disease clearly in excess of the number normally expected in a community or area.
- Evaluate -** to compare what was achieved to what was expected to be achieved. Annual evaluation of usage of health services means comparing actual usage of the services each year to the usage targets for those services to see if the usage targets were or were not achieved, and the reasons.
- Feedback -** information provided by others, such as a supervisor, on the way a person is doing work. Feedback informs a health worker of work he is doing well and should continue, as well as ways to improve other work.
- Health Area -** the geographic area assigned to a supervisor by the government. A health area may include a health facility, community health workers, or both.
- Monitor -** to closely observe or check on a routine basis. Monitoring performance of health workers in delivering a health service and monitoring usage of the service are ways that a supervisor of a local area can assess the effectiveness of the service.
- New episode -** an occurrence of a health problem which happens after any previous occurrence has stopped.

Percentage - (%)	<p>a part of a whole expressed in hundredths. If 50% of a population is the percentage of people that are female, it means that 50 out of every 100 people are female. The following examples show different ways of expressing the same meaning:</p> $50\% = 0.50 = 50/100$ $42\% = 0.42 = 42/100$ $4\% = 0.04 = 4/100$ <p>To multiply by a percentage, first write it as a decimal fraction, for example, 0.50.</p>
Promotional activities -	things said or done to show people that something is good or desirable. <u>Promotional activities</u> for a health service might include telling more people about the service and benefits of its use, making them <u>want</u> to use it.
Target -	a goal to work towards, expressed as a number or rate.
Target Population -	the people for whom a service is primarily (or solely) intended. For example, the <u>target population</u> for diarrhoea treatment is children under 5; the target population for treatment of trauma is all ages.
Usage -	the extent to which a service is used. <u>Usage</u> can be stated as the number of times a service is used or as a usage rate.
Usage rate -	<p>a proportion or percentage calculated as follows:</p> $\text{usage rate} = \frac{\text{actual usage}}{\text{desired usage}}$
Actual Usage -	the number of times a service is really used. Reviewing records such as patient registers is one way to determine <u>actual usage</u> of a service.
Desired usage -	the number of times a service would be used if members of the target population came when they needed the service. <u>Desired usage</u> is usually greater than actual usage, since some target population members do not use the service.
Use of a Service -	what you count to measure usage, for example, new episodes treated or times the service is given.

COURSE SUMMARY

COURSE SUMMARY

Controlling childhood death and disability will require long-term efforts on the part of a community. If health workers are to contribute to these efforts, they must receive adequate supervision and support.

These training materials were designed to teach you supervisory skills, that is, skills in PLANNING, MONITORING, TRAINING, and EVALUATING. The skills taught in the course are not only for use in supervising the treatment and control of diarrhoea, but can also be used in other health services such as immunization programmes, the treatment of acute respiratory infections, or malaria.

"Supervisory Skills" includes an introduction and six modules. The main points of each module are listed in this summary. Review these points and think about what you have learned and what you plan to do with your new skills and knowledge. If you work hard to apply these skills, you should be rewarded by improvements in the health services being provided to your community.

COMMUNITY INVOLVEMENT

- Work with the communities in your health area. Be sure the communities join in discussions and help make decisions about health matters.
- Find out who has access to health services and who does not.
- Find out through discussion with the community what health problems are of greatest concern to them.
- Discuss with community decision-makers possible ways of improving health services and the health of the community.
- Reach agreement with the communities on how their resources and those of the Ministry of Health will be used to improve health.

TREATMENT OF DIARRHOEA

- Dehydration is the most important problem that must be treated in a patient with diarrhoea.
- Families should be educated about proper treatment of diarrhoea in the home. This can often prevent dehydration from occurring.
- Health workers should:
 - ask, look and feel for the signs of dehydration
 - select a treatment plan based on the degree of dehydration
 - check for signs and symptoms of serious problems other than diarrhoea and give treatment where appropriate.
- A diarrhoea treatment wall-chart is included in this course to help health workers remember how to assess and treat diarrhoea.

TARGETS

- Targets help people to:
 - know the goals they are working towards
 - see their progress and feel proud of their work
 - estimate what supplies and resources are needed.
- People will usually work harder to achieve targets if:
 - the targets are realistic and
 - they have helped to set the targets.
- To set realistic targets for usage of any health service, you first need to estimate past usage of the service and consider ways to increase both access and usage.

TRAINING

- Training should always include practice of tasks, in a situation as similar to the job as possible.
- Before practising the task, learners should receive any necessary information and examples.
- Different methods can be chosen to carry out training.
- Learners must receive feedback on their practice in order to know how well they are doing a task and how they can improve.
- Evaluate training by watching learners working. If they still cannot carry out a task, find out why. Use the results of evaluation to improve training.

MONITORING PERFORMANCE

- Monitoring the performance of health workers should help to discover any problems in delivery of health services and help health workers improve their work. It should also find work that is being done well.
- Before monitoring, decide what items are important to monitor, then decide how and when to monitor each item. Checklists will help you remember what to look for.
- A rational, step-by-step approach should be used to find solutions to problems identified in monitoring. Briefly, the steps are to:
 - describe the problem;
 - identify possible causes of each problem;
 - find a reasonable solution to each problem;
 - monitor the solution once it is implemented.
- After monitoring, always provide prompt feedback to health workers.

MONITORING AND EVALUATING USAGE

- Monitoring usage of health services each month helps to find and correct problems affecting usage of the services at an early stage.
- Evaluating whether usage targets for the year were achieved should indicate how much progress has actually been made in increasing usage of health services, and increase the accuracy of future usage targets.
- Monitoring and evaluating usage should also include trying to find out why usage is up or down or why usage targets were or were not met, and taking appropriate action.
- It is important to investigate reasons for both problems and successes.
- After monitoring and evaluating usage, feedback should be given to health workers and the community.

